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CONFIRMATION NO. 4703

<b>SERIAL NUMBER</b> 10/628,464	<b>FILING OR 371(c) DATE</b> 07/29/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 67824.426001
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/398,727 07/29/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***

\*\* 11/05/2003

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 67	<b>INDEPENDENT CLAIMS</b> 9
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

21967

**TITLE**

Identification of a novel bitter taste receptor, T2R76

<b>FILING FEE RECEIVED</b> 1115	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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